SCHEDULE B (FEC Form 3X)

		Use seperate schedule(s)		check o			٦.		PF	AGE.	01/6		
ΙŤ	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	F	21b 27	$\bigcap_{i=1}^{n}$	22 28a	_	3 8b	24 28c	П	25 29	П	26 30b
	y Information copied from such Reports and Statem											5	
or	for commercial purposes, other than using the name	e and address of any political co	omm	littee to s	SOIIC	t contri	outior	is iro	m such d	comm	nittee		
\rangle	NAME OF COMMITTEE (In Full) Build Political Action Committee of the Nat	ional Association of Home	e Bu	ilders									
	Full Name (Last, First, Middle Initial)						ction	n ID:	53728-	3649	94082	212	44
۹.	Alaskans for Don Young Inc.					Date o	f Disk		ment	, , ,	0 Ď 6	V	
	Mailing Address 2504 Fairbanks Street												
	City State Zip Code Anchorage AK 99503						nt of E	Each	Disburse	-		-	b
	Purpose of Disbursement 2006 General		0	11						2	2500.0	00	
	Candidate Name Don Young			egory/ ype									
	Office Sought: X House Senate President State: AK District: 01	ment For: 2006 Primary X General Other (specify)											
	Full Name (Last, First, Middle Initial)								F0700		20774	4 77	
3.	Alaskans for Don Young Inc.					Transaction ID: 53728-5596277117729 Date of Disbursement							
	Mailing Address 2504 Fairbanks Street					0 4		^D 0	6 /	2	0 Ď 6		
	City Anchorage	State Zip Code AK 99503				Amour	nt of E	Each I	Disburse			-	d
	Purpose of Disbursement 2006 Primary 011									2	2500.0	00	
	Candidate Name Don Young												
	·	ment For: 2006 Primary General Other (specify)											
Э.	Full Name (Last, First, Middle Initial) Back America's Conservatives Pac (BAC PAC)					Transa Date o			09078-:	3489	96486	997	60
	DAUN AITIETICA'S COTISETVALIVES FAC (DAO FAC)					M N	_			/ Y	Υ .	Υ	
	Mailing Address 1251 Dartmouth Court					0 4		^D 2	6	2	0 Ď 6		
	City Alexandria	State Zip Code VA 22314				Amour	nt of E	Each	Disburse	-		-	b
	Purpose of Disbursement Leadership PAC Contribution 011							-		, 5	0.000.0	00	
	Candidate Name												
	Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)											
•	UBTOTAL of Disbursements This Page (optional)			•					•	100	0.00	0	$\overline{}$
	ODITION DISDUISATION THIS I age (optional)			<u>. </u>		—	-			-	-		=
Т	OTAL This Period (last page this line number only)												